

INDEPENDENT SCHOOL DISTRICT 196  
Rosemount-Apple Valley-Eagan, Minnesota  
*Educating our students to reach their full potential*

Series Number 602.6.2.5P Adopted June 2007 Revised October 2021

Title Report of Data Collection for Consideration of Single Subject Acceleration

Student's name \_\_\_\_\_ Date of birth \_\_\_\_\_ C.A. \_\_\_\_\_  
yr/mth

School \_\_\_\_\_ Grade \_\_\_\_\_ Subject area \_\_\_\_\_

Name of parent(s)/guardian(s) \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

**Achievement data:**

**MAP Scores:**

**Report Cards (for elementary students in subject being considered):**

Data collection by: \_\_\_\_\_ Date: \_\_\_\_\_

**Cognitive Ability Test – Must have been completed within two years.**

**Name of test:**

**Date Administered:**

**Results:**

Data collection completed by: \_\_\_\_\_ Date: \_\_\_\_\_

**Critical Questions:**

	Yes	No
A. Has the student been single subject accelerated previously?	<input type="checkbox"/>	<input type="checkbox"/>
B. Does the student want to be considered for single subject acceleration?	<input type="checkbox"/>	<input type="checkbox"/>
C. Will a sibling be in the same subject if the student is single subject advanced?	<input type="checkbox"/>	<input type="checkbox"/>
D. Does the student currently have like-ability peers in their grade level in the subject being considered for single subject acceleration?	<input type="checkbox"/>	<input type="checkbox"/>

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**Report by classroom subject teacher:**

Teacher: \_\_\_\_\_ Date: \_\_\_\_\_

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**District Placement Assessment Results:**

Teacher: \_\_\_\_\_ Date: \_\_\_\_\_

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c: case studies file